## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

A-735A

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |              |                                 |              |                  |            | SMALL ENTITY TYPE OR |                        |    | OTHER THAN SMALL ENTITY |                        |
|--|---|---|--------------|---------------------------------|--------------|------------------|------------|----------------------|------------------------|----|-------------------------|------------------------|
| TOTAL CLAIMS   |   |   | 17           |                                 |              |                  |            | RATE                 | FEE                    |    | RATE                    | FEE                    |
| FOR  |   |   | NUMBER FILED |                                 | NUMB         | ER EXTRA         |            | BASIC FEE            | 370.00                 | OR | BASIC FEE               | 740.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | S minus 20=  |                                 | * 60         |                  |            | X\$ 9=               |                        | OR | X\$18=                  | 1080 .                 |
| INDEPENDENT CLAIMS   |   |   | / minus 3 =  |                                 | * -          |                  |            | X42=                 |                        | OR | X84=                    |                        |
| MU   | LTIPLE DEPEN  | DENT CLAIM P                                | RESENT       |                                 |              | P                |            | +140=                |                        | OR | +280=                   | 280.                   |
| * If the difference in column 1 is less than zero, enter "0" in c  |   |   |              |                                 |              | column 2         |            | TOTAL                |                        | OR | TOTAL                   | 2100                   |
| CLAIMS AS AMENDED - PART II  |   |   |              |                                 |              |                  |            | •                    |                        |    | OTHER                   |                        |
| (Column 1)   |   |   | (Column 2)   |                                 |              | (Column 3)       |            | SMALL E              | NTITY                  | OR | SMALL                   | ENTITY                 |
| AMENDMENT A  |   | - CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | - HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |            | RATE                 | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus        | **                              |              | =                |            | X\$ 9=               |                        | OR | X\$18=                  |                        |
|  | Independent   | *   | Minus        | ***                             |              | =                | ll         | X42=                 |                        | OR | X84=                    |                        |
|  | FIRST PRESE   | NTATION OF ME                               | JLTIPLE DEF  | PENDENT                         | CLAIM        |                  | U          | +140=.               |                        | OR | +280=                   |                        |
|  |   |   |              |                                 |              |                  | l          | TOTAL                |                        | 00 | TOTAL                   |                        |
|  |   | (Oaluma 4)                                  |              | (O-1                            | 0)           | (Cal             | ,          | ADDIT. FEE           |                        | On | ADDIT. FEE              |                        |
|  |   | (Column 1)<br>CLAIMS                        |              | (Colui                          |              | (Column 3)       | 1 6        | 1                    | ADDI-                  | 1  |                         | ADDI-                  |
| AMENDMENT B  |   | REMAINING<br>AFTER<br>AMENDMENT             |              | NUM<br>PREVIO<br>PAID           | OUSLY        | PRESENT<br>EXTRA |            | RATE                 | TIONAL<br>FEE_         |    | RATE                    | TIONAL                 |
|  | Total   | *   | Minus        | **                              |              | =                |            | X\$ 9=               |                        | OR | X\$18=                  |                        |
|  | Independent   | *   | Minus        | ***                             |              | =                |            | X42=                 |                        | OR | X84=                    |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDEN   |   |              |                                 | CLAIM        |                  | 1          |                      |                        |    | 000                     |                        |
|  |   |   |              |                                 |              |                  |            | +140=                |                        | OR | +280=                   |                        |
|  |   |   |              |                                 |              |                  | -          | TOTAL<br>ADDIT. FEE  |                        | OR | TOTAL<br>ADDIT. FEE     |                        |
|  |   | (Column 1)                                  |              | (Colu                           |              | (Column 3)       |            |                      |                        |    |                         |                        |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |              | HIGH<br>NUM<br>PREVIO<br>PAID   | BER<br>OUSLY | PRESENT<br>EXTRA |            | RATE                 | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus        | **                              |              | =                |            | X\$ 9=               |                        | OR | X\$18=                  |                        |
|  | Independent   | *   | Minus        | ***                             |              | =-               | ]          | X42=                 |                        | OR | X84=                    |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT  |   |              |                                 | T CLAIM      |                  | <b>』</b> ∤ | +140=                |                        | UH |                         |                        |
|  | * If the entry in column 1 is less than the entry in column 2 write "0" in column 3 |   |              |                                 |              |                  |            |                      |                        | OR | +280=                   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |              |                                 |              |                  |            |                      |                        |    |                         |                        |